## **Inspection Report**

South Dakota Cosmetology Commission 500 E Capitol Ave Pierre, SD 57501 605-773-6193 cosmetology@state.sd.us

A. SALON OR BOOTH NAME:	Sarden B	eauly.	Balm,	
ADDRESS: 9/2 1	Cly and	1		CITY: Sinu Falls
OWNER NAME: Sandra	Escutia		TELEPH	ONE NUMBER: 360-572-177)
SALON or BOOTH LICENSE NUMBER: <u>CR - 68755-18</u> EXPIRATION DATE: <u>3-6-18</u>				
2.	Salon Cosmetology (all) New	Hair	Home Esthetics Re-Inspection	00101
C. During all working hours.	YES is sat	isfactory NO	is NOT satisfac	tory SDCL 36-15 ARSD 20:42
YES NO 2. Certified for microdiction of the control	ermabrasion and/or ABC type, 5 lbs., east at a static meets virucidal, funginer available (large ed) fresh, clean and ainers - to store only ntainers for soiled to do tools clean and did at tools clean and did a static meets with the static meets and static meets.	electric nail files sily accessible, sings, gloves, a ion gicidal, and bacenough) free from contait cleaned or disitively, linens, to sinfected after experience of the content of the conten	s and/or eyelash ocharged	tape, blood spill procedures ents  + covers need to be remove
YES NO 12. Floors clean (no hair YES NO 13. Walls, ceilings, fixtur YES NO 14. Plumbing, hot/cold re YES NO 15. Electrical, appliance YES NO 16. Ventilation in work a YES NO 17. Restroom, clean with YES NO 18. Storage room or cab	res, vents clean and unning water and ce cords and outlets sa rea	in good repair _ ntral sewage sy afe and in good liquid soap blies	stem repair	
19. Hair work stations clean and disinfected				
YES NO 32. Attachments for elect	r clean and disinfecte and/or clean and disi disposed after each in n, closed, and labele uipment is used for p clean and disinfecte trical equipment clea	ed	udes waxers, electric files of	or curling irons) <u>have altackment</u> by
YES NO 34. Other laws and/or rul	- separate exit – sep es that apply (list )_	arate from resid	dential area	
D. List of Personal Licensees (fin				
		Lic # Lic # Lic # Lic # Lic # Lic #		Expires: Expires: Expires: Expires: Expires: Expires: Expires: Expires:
		rooling	unlic	ensed worker - say
he es a borber	cruz ma	reelino	- unit	ensec worker -sap
	<del>"</del>			
F. Signature:	)	Inspecto	2 - / - /8 or signature	May Basmussel
Licensee reviewed inspection report with Inspector YES NO (if "no" why not)				
RECHECK FAIL Jullow form PASS				